	OIPE	
FEB-15-2006 11:5	52 From:	
	FEB 1 5 2006	PAI

To:USPTO

RT B - FEE(S) TRANSMITTAL

Mail Stop ISSUE FEE

•	ompiece and sens ve	PADEMAN		or <u>F</u>	Commissioner for P.O. Box 1450 Alexandria, Virg ax (571) 273-2885			
11 01 21	NSTRUCTIONS: This for portopriate. All further corr dicated unless corrected b paintenance fee sottification	m should be used for trans espondence including the P elow or directed otherwise is	mitting the ISSUI atent, advance ord in Block 1, by (a)	FEE and Pers and notifi specifying a	UBLICATION FEE (if requirement of maintenance fees we new correspondence address;	red). Blocks I through 5 st fill be mailed to the current and/or (b) indicating a sepa	hould be completed where correspondence address as trate "FEE ADDRESS" for	
2	CURRENT CORRESPONDENCE ADDRESS (Non: Use Black I for any charge of address) 7590 01/25/2006				Note: A certificate of Fec(s) Transmittal. The papers. Each additional have its own certificate	Note: A certificate of mailing can only be used for domestic mailings of the Fec(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.		
	Troy R. Lester Acushnet Company PO Box 965		·		Cer I hereby certify that the States Postal Service vaddressed to the Mai transmitted to the USP	nificate of Mailing or Trans is Fec(s) Transmittal is being with sufficient postage for fir Stop ISSUE FEE address TO (571) 273-2885, on the c	mission g deposited with the United st class mail in an envelope above, or being facsimile date indicated below.	
	Fairhaven, MA 027	19-0903			Mulu	elle CHAA	(Depositor's name) (Signature) (Units)	
_						ATTORNEY DOCKET NO.	CONFIRMATION NO.	
Į	APPLICATION NO.	FILING DATE		FIRSTNAMED			8491	
	10/774,277	02/06/2004		Michael J.	. Swiivan CERS, OR OTHER HYBRID (B03-71		
٠ .			ISSUE F		PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE	
l	APPLN. TYPE	SMAIL ENTITY	-		\$300	\$1700	04/25/2006	
	lanoisivingnon	NO	\$1400	,	\$300	31700	V 125/2000	
ſ	EXAMINER ART UN		ART UN	NIT CLASS-SUBCLASS				
•	BUTTNEI	R, DAVID J	1712	2 524-397000				
CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer				2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered anomey or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.				
	Number is required.	D RESIDENCE DATA TO F			· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·		
	3. ASSIGNEE NAME AND PLEASE NOTE: Unles recordation as set forth	a an assignce is identified b in 37 CFR 3.11. Completion	clow, no assigned	data will app	cear on the patent. If an assignment for filing an assignment. CE: (CITY and STATE OR CO	nee is identified below, the	document has been filed for	10774277
	(A) NAME OF ASSIG	4ec	()	3) RESIDEN	CE: (CITY and STATE OR OF	MANAGAS FAAG AREET.		
	Acushnet (Company	. Coll on hom		naven MA , patent): 🔲 Individual 💥	02 FC-1504	1400.00 DA 300.00 DA 	
			ones (will not be p	b. Payment of	Fee(s):	corporation or outer provide		
4a. The following fee(s) are enclosed: 4b				A check in the amount of the fcc(s) is enclosed.				\odot
XXI Publication Fee (No small entity discount permitted)			Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 502309 (enclose an extra copy of this form).				M	
	XX Advance Order - #			Deposit Ac	rector is hereby authorized by count Number 502309	charge the required fee(s), o	or credit any overpayment, to copy of this form).	S
5. Change in Entity Status (from status indicated above)				h Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).				•
The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any praviously paid issue fee to the application identified about NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignce or other interest as shown by the records of the United States Patent and Londonnark Office.							r the assignee or other party in	AVAILABL
	Authorized Signature	1-16/10			Date	2-15-06		∑
	Typed or printed name	Troy R. Lesto	r		Registration			
			21 - 24	ing is comire	den abrain or resain a benefit h	withe nublic which is to file (and by the USPTO to process)	111

This collection of information is required by 37 CFR 1.31. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the cumpleted application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete submitting the cumpleted application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete which form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandrin, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissionar for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

PTOL-85 (Rev. 07/05) Approved for use through 04/30/2007.

OMB 0651-0033 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE



FAX COVER SHEET

DATE:

February 15, 2006

TO:

Mail Stop Issue Fee

Commissioner for Patents

Examiner: MOORE, MARGARET G

Art Unit: 1712

Facsimile No.: 571-273-2885

FROM:

Troy R. Lester

Customer Number: 40990 Phone No.: 508-979-3534

RE:

Application Serial No.: 10/774,277

Payment of Issue Fee and Publication Fee (if required)

Pages including cover sheet:

Certificate of Transmission Under 37 C.F.R. § 1.8

I hereby certify that this correspondence (2 pages), including this facsimile cover sheet, and a signed PART B - FEE(S) TRANSMITTAL of Form PTOL-85 (1 pages), is being facsimile transmitted to the U.S. Patent and Trademark Office, Office of Patent Publication

Name of person signing Certificate

CONFIDENTIALITY NOTICE: This facsimile transmission (and/or the document accompanying it) may contain confidential information belonging to the sender. The information is intended only for the use of the individual or entity named above. If you are not the intended recipient, you are hereby notified that any disclosure, copying, distribution or the taking of any action in reliance on the contents of this information is strictly prohibited. If you have received this transmission in error, please immediately notify us by telephone to arrange for the return of the documents. Thank you.

Fairhaven, MA 02719-0965



FOOTJOY.

508-979-3534 риоле (508) 979-3063 fax